

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000021303

Entity Name: HTG KONOVER, LLC

FILED  
Apr 20, 2012  
Secretary of State

## Current Principal Place of Business:

3225 AVIATION AVE.  
602  
COCONUT GROVE, FL 33133 US

## New Principal Place of Business:

## Current Mailing Address:

3225 AVIATION AVE.  
602  
COCONUT GROVE, FL 33133 US

## New Mailing Address:

FEI Number: 27-1984551      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTHEW RIEGER, P.A.  
3225 AVIATION AVE.  
602  
COCONUT GROVE, FL 33133 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: RIEGER, RANDY  
Address: 3225 AVIATION AVE. #602  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: P  
Name: RIEGER, RANDY  
Address: 3225 AVIATION AVE, STE. 602  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VP  
Name: RIEGER, MATTHEW  
Address: 3225 AVIATION AVE, STE. 602  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VP  
Name: WILSON, SHAWN  
Address: 3225 AVIATION AVE, STE. 602  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: ST  
Name: SARIOL, MARIO  
Address: 3225 AVIATION AVE, STE. 602  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VP  
Name: COHEN, ED  
Address: 3225 AVIATION AVE, STE. 602  
City-St-Zip: COCONUT GROVE, FL 33133 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RANDY RIEGER

MGRM

04/20/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date